STATEMENT OF

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FORM 1	ORGANIZATION						MAMII: 58 W CENTER
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)		nple:If typing, type the lines.	12FE4N		
GEORGIA	REPL	JBLICAN LEA	D ER	SHIP FEDE	RAL C	OMMIT	ree
ADDRESS (number a	i I I I	P. O. BOX 74	41274	<u> </u>			
(Check if address is changed)		BOYNTON BEACH		FL	33474		
			CITY		STATE	ZIP	CODE
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) RepublicanLeadershipCommittees@yahoo.com (Check if address is changed)							
COMMITTEE'S WEB	PAGE ADI	DRESS (URL)					
(Check if is change			111				
2. DATE 10	ິ່ 24	" ´ 2012 `					
3. FEC IDENTIFIC	CATION NU	IMBER C				•	
4. IS THIS STATE	MENT X	NEW (N) OR		AMENDED (A)			
I certify that I have of		is Statement and to the be		mowledge and belief i	t is true, corr	ect and complet	e.
Signature of Treasure	er <u> </u>	Irduard	Bu	b	Date 1	0 ′ 24°	[′] 2012 [°]
NOTE: Submission of	-	ous, or incomplete informatio	•			•	of 2 U.S.C. §437g.
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